

U.S. Department of Justice
United States Marshals Service

PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF UNITED STATES OF AMERICA	13 SEP 17 PM 4:18	COURT CASE NUMBER 4:11-CR-259-01
DEFENDANT ARMANDO CHAVEZ, M.D.	SOUTHERN DIST. S/TX	TYPE OF PROCESS Writ of Garnishment

SERVE AT { NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN
Registered Agent: Shannon Skurner, Old Republic National Title Company
ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)
777 Post Oak Blvd., Suite 240, Houston, TX 77056

United States Courts
Southern District of Texas
FILED

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW

United States Attorney's Office
1000 Louisiana, Suite 2300
Houston, Texas 77002
Attn: Martha Minnis

Number of process served with this Form 285 **SEP 23 2013** 1

Number of process served in this case **David J. Bradley, Clerk of Court** 3

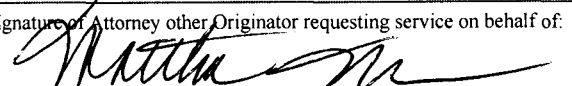
Check for service on U.S.A.

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service):

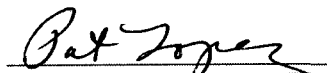
Fold

Fold

PLEASE PROCESS THIS SERVICE NO LATER THAN NOON, WEDNESDAY (09/18/2013).

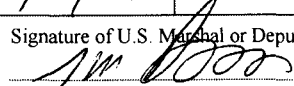
Signature of Attorney other Originator requesting service on behalf of: 	<input checked="" type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT	TELEPHONE NUMBER 713.567.9000	DATE 9/17/13
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SPACE BELOW FOR USE OF U.S. MARSHAL ONLY-- DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated. (Sign only for USM 285 if more than one USM 285 is submitted)	Total Process 1	District of Origin No. 79	District to Serve No. 79	Signature of Authorized USMS Deputy or Clerk 	Date 9/17/2013
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I hereby certify and return that I ☒ have personally served, ☐ have legal evidence of service, ☐ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc. shown at the address inserted below.

☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)

Name and title of individual served (if not shown above) SHANNON SKURNER (1ST VP)	<input type="checkbox"/> A person of suitable age and discretion then residing in defendant's usual place of abode
Address (complete only different than shown above)	Date 9/18/13 Time 2:45 <input checked="" type="checkbox"/> pm
	Signature of U.S. Marshal or Deputy 

Service Fee \$55.00	Total Mileage Charges including endeavors \$6.22	Forwarding Fee	Total Charges \$61.22	Advance Deposits	Amount owed to U.S. Marshal* or (Amount of Refund*) \$0.00
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REMARKS:

PRINT 5 COPIES:

1. CLERK OF THE COURT
2. USMS RECORD
3. NOTICE OF SERVICE
4. BILLING STATEMENT*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.
5. ACKNOWLEDGMENT OF RECEIPT

PRIOR EDITIONS MAY BE USED